

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE COEUR D'ALENE-SPOKANE RIVER
BASIN WATER SYSTEM

CIVIL CASE NUMBER: 49576

Ident. Number 95-16623Date Received: 10-29-12Receipt No: N029551Received By: aw

RECEIVED NOTICE OF CLAIM TO A WATER RIGHT

OCT 29 2012

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day

1. Name of Claimant(s) Stansbury Michael Phone 208 4572088

Mailing Address 860 S. Madison Rd. Post Falls ID Zip 83854
Street or Box City State

2. Date of Priority: (Only one per claim) 10.13.88
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water ☒ or Other () (a) _____
which is tributary to (b) _____

4. Location of Point of Diversion is: Township 50N, Range 5W, Section 8,
SE 1/4 of N 1/4, or Govt. Lot 3 BM. County of Kootenai;

Parcel (PIN) no. L+2 B/K A08 50N05W

Additional points of diversion if any: _____

If available, GPS coordinates: See attached plat

5. Description of diverting works (Wells, Pumps, Spring boxes, Pipelines, Etc.) including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well. well water origin at lot 2 of Eagle Point Sub. & travels in 2 1/2" x 2 pipes across lot 1 corners 90° in parcel 2 ID 891 runs the distance west to east approximately 3/4 of the way the two lines converge to one 1 1/4 line, the line continues on to parcel 5 and then converts to 3/4 line and then on to parcel 3 see Plat (Blue line)

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For Domestic/stock water purposes from year around amount .04 CFS
Month/Day Month/Day cfs () or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed .04 cfs () or AFY ()

8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;

Stockwater and Number of livestock) one house & secondary residence;
have had two horses and thirty five p-cocks, chickens
& ducks. at this time unavailable to maintain stock due
to lack of water capacity.

9. Location of Place of Use is: Township 50N, Range R5W, Section 8,
SE 1/4 of NE 1/4, Govt. Lot 5 BM. Parcel (PIN) no. 50N05W08A100
If different than shown in Item 4

for (Check One) Domestic () Stock () Domestic and Stock (☒)

Additional places of use, if any secondary residence

10. In which county (ies) are lands listed above as place of use located? Kootenai

11. Do you own the property listed above as place of use? Yes (☒) No ()

If the answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.

_____ or None ()

13. Remarks: well of distribution system have existed since 1976

14. Basis of Claim (Check One) Beneficial Use (☒) Posted Notice () License () Permit () Decree ()

Court _____ Decree Date _____ Plaintiff v. Defendant ?

If applicable provide IDWR Water Right Number 95-8160

15. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notices in the Coeur d'Alene-Spokane River Basin Adjudication." (b.) I/We do () do not () wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 8

For Individuals: I/We do solemnly swear or affirm under penalty of perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) Michael Stansbury Date: 10.28.12

_____ Date: _____

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

_____ of _____,
Title Organization

that I have signed the foregoing document in the space below as

_____ of _____,
Title Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Title and Organization _____

16. Notice of Appearance:

Notice is hereby given that I, _____, will be acting as attorney at law of behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____ Date _____

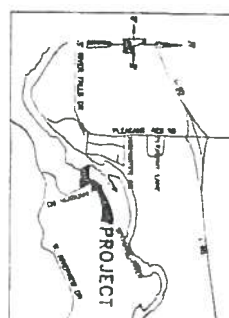
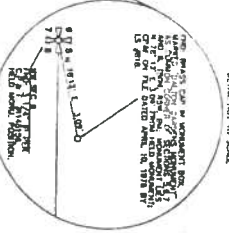
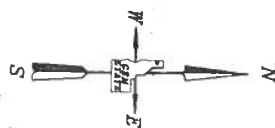
Address _____

Last Name _____ Identification No. _____

1469517-A

Book 6 Page 419

A PORTION OF GOVERNMENT LOT 3
LOCATED IN THE SOUTH HALF OF THE NW 1/4,
SEC. 8, T. 50 N., R. 5 W., B.M.,
KOOTENAI COUNTY, IDAHO
OCTOBER, 1996



VICINITY MAP

NO SCALING

REFERENCES

- (R-1) RECORD OF SURVEY BY JOHN W. HOWE, PL'S 412 RECORDED IN BOOK 4, ON PAGE 245, AS INSTRUMENT # 1026068, KOOTENAI COUNTY RECORDS OFFICE.
- (R-2) PLAT OF UNDEVELOPED VIEW ESTATES 2ND ADDITION BY BRANT MORRIS, PL'S 6602, RECORDED IN BOOK 6, ON PAGE 15, KOOTENAI COUNTY RECORDS.
- (R-3) WARRANTY DEED - INSTRUMENT #1400792, KOOTENAI COUNTY RECORDS.

LEGEND

- (P) RECORDED - AS PER CORRESPONDING REFERENCE

LINE TABLE		DISTANCE
LINE	DIRECTION	
L1	S 88°14' E	1.59' (R-1)
L2	S 88°14' E	1.59' (R-1)
L3	N 09°01'42" E	61.93' (R-1)
L4	N 09°01'42" E	61.92' (R-1)
L5	N 09°16'10" W	163.93' (R-1)
L6	N 21°13'13" W	141.59' (R-1)
L7	N 02°13'13" W	141.59' (R-1)
L8	N 02°50'13" E	100.64' (R-1)
L9	N 12°47'17" E	0.01'
L10	N 12°45'33" E	61.1' (R-1)
L11	S 32°28'18" E	65.17'
L12	S 32°28'18" E	65.17'
L13	S 02°04'13" W	65.04' (R-1)
L14	N 41°13'13" W	3.06'

NOTES

- (1) THERE WAS NO ATTEMPT MADE TO SHOW PHYSICAL LEADERS OF THE PROPERTY OR SHOW ANY RECEIPTS OR NON-RECORDED EASEMENTS, ENCUMBRANCES, RESTRICTIVE COVENANTS AND OTHER TITLE CONTROL DECEPT FOR THOSE THAT ARE SHOWN HEREIN
- (2) FINANCE LINE AGREEMENT IS DATED 10/16/2006 IN FORTNATH COUNTY RECORDS, AS INSTRUMENT #1466082 ADDITIONAL INSTRUMENT #1467035

BASIS OF BEARING

BASIS OF HEARING IS S 8974.34 "C" FROM A 5/8 REBAR WITH CAP, SUB - 15 632, MARKING THE NORTHWEST CORNER OF TAX NO 14103 TO A 3/8" REBAR MARKING THE INCH/FT CORNER OF S&D TAX NO. 14103 PER R-1

ROAD TANGENT TABLE

UNIT	001000	03/000
A1	11/10/00	000
A2	11/10/00	000

ROAD CURVE TABLE

Case	Age	Sex	Height	Weight	Color	Time	Time
1	10.00	M	1.70	18.0	1.70	1.70	1.70
2	10.00	F	1.60	14.0	1.60	1.60	1.60
3	10.00	M	1.70	18.0	1.70	1.70	1.70
4	10.00	F	1.60	14.0	1.60	1.60	1.60
5	10.00	M	1.70	18.0	1.70	1.70	1.70
6	10.00	F	1.60	14.0	1.60	1.60	1.60
7	10.00	M	1.70	18.0	1.70	1.70	1.70
8	10.00	F	1.60	14.0	1.60	1.60	1.60
9	10.00	M	1.70	18.0	1.70	1.70	1.70
10	10.00	F	1.60	14.0	1.60	1.60	1.60

SURVEYOR'S CERTIFICATE

JOHN H. CEMET, C/LA 61899, A PROFESSIONAL ENGINEER AND LAND SURVEYOR IN THE STATE OF OREGON, DOES HEREBY CERTIFY THAT THIS IS A TRUE SUMMARY OF THE PLATTED LAND MADE BY ME OR UNDER MY DIRECT SUPERVISION IN COMPLIANCE WITH THE LAWS OF THE STATE OF OREGON.



GEM STATE

7580 N. GOVERNMENT WAY • COEUR D'ALENE, IDAHO 83814
PLAT OF EAGLE POINT SUBDIVISION (S 8, T 30 N, R 5 W)
KOOTENAI COUNTY, IDAHO

ENGINEERING
&
SURVEYING

PLOTTED BY: BJA	DATE: 10/10/1998	SCALE: 1" = 100'	DWG. NO. 9900007
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A PORTION OF GOVERNMENT LOT 3
LOCATED IN THE SOUTH HALF OF THE NW 1/4,
SEC. 8, T. 50 N., R. 5W., B.M.,
KOOTENAI COUNTY, IDAHO
OCTOBER, 1996

Book G Page 419-A

HERBERT CRISTY THAT I HAVE EXAMINED THE WRITTEN PLAY AND DECIDED THE PLAY COMPUTATIONS THEREON AND HAVE DETERMINED THAT THE PAYMENTS OF THE STATE CODE PERTAINED TO PLAYS AND SURVEYS HAVE BEEN SET.

DATED MAY 6th 1964
Rude
FOOTSON
ADDITIONAL COUNTY SHERIFF

THE PLAY MEETS THE REQUIREMENTS OF THE KODIAK COUNTY SUBSISTENCE PROGRAM, AND THE CONDITIONS IMPOSED BY THIS BOARD, AND IS HEREBY ACCEPTED AND APPROVED FOR PLANS.

DATE THIS 3 DAY OF May . 1926

DIABURN, BOARD OF COMMISSIONERS, BOZEMAN COUNTY, IDAHO

50-1379, IS HERETOBY ON THIS PLAT, NO BUILDING, OVERLAP, OR SETBACKS SHALL BE ERECTED UNTIL SANITARY RESTRICTION REQUIREMENTS ARE SATISFIED AND LIFTED.

THIS PLAY APPROVED, DATED THIS 24th DAY OF October 1926 Robert Jack

PARLIAMENTARY HEALTH DISTRICT 1

DAY OF 18

PHARMACEUTICAL HEALTH DISTRICT 1

THE KODJALIA COUNTY PLANNING COMMISSION HAS REJECTED THIS PLAN

DATED THIS 7th DAY OF Nov. 1964

CHARTWELL, KROODEN COUNTY PLANNING COMMISSION

THE PLAT WAS FILED FOR RECORD IN THE OFFICE OF THE RECORDER
OF FORTBEND COUNTY, DALLAS, THIS 13 DAY OF December, 1946
AT 11:58 A.M. IN BOOK 8 OF PLATS, PAGE 419 + 419 -

Quail - J. Cuyler

I HEREBY CERTIFY THAT THE TAXES DUE FOR THE PROPERTY DESCRIBED IN THE OWNERS CERTIFICATE HAVE BEEN PAID through City of St. Louis 3.1.1985.

DATED THIS 7th DAY OF July, 1996

James C. Craft
FOOTMAN COUNTY TREASURER

[illegible]

THIS PLAN CONTAINS 10,316 ACRES MORE OR LESS, OF WHICH 8,718 ACRES IS MORE OR LESS, SAYS MONT-OF-SEY FOR MANSION ROAD, TO BE GRANTED TO THE PUBLIC FOREVER.

[illegible]

John Doe
PATRICK J. HALL

ACCOMPLISHED
STATE OF INDIANA
COUNTY OF KNOX } ss.

1. Individual _____, a citizen of _____ and for said county and state,
DO HEREBY CERTIFY THAT ON THE 16th DAY OF December, 1964, BEFORE ME,
PERSONALLY APPEARED Barbara J. White, said _____, who

MOHAWY PUBLIC FOR STATE OF INDIANA

COMMISSION DATES 5/20/2002

GEM STATE

PLAT OF EXALE POINT SUBDIVISION
KOOTENAI COUNTY, IDAHO
/280 N. GOVERNMENT WAY • COEUR D'ALENE, IDAHO 83814

PRINTED BY: BAA	DATE: 10/10/1990	PRINTED BY: BAA	DATE: 10/10/1990
PRINTED BY: BAA	DATE: 10/10/1990	PRINTED BY: BAA	DATE: 10/10/1990

PLANTED BY: PLS	DATE: 10/10/1999	SCALE: N/A
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88-28-71360

ENTERED NOV 28 1988

PANHANDLE HEALTH DISTRICT I APPLICATION AND PERMIT FOR ON-SITE SEWAGE SYSTEM

INDIVIDUAL SEWAGE DISPOSAL SITE EVALUATION

Paid: Cash _____ Check ☒ No Fee _____

Fee: _____

Date: _____

Site Eval. # _____

For (name) Pat StansburyLegal description of property Parcel No. 5 - A part of the SE $\frac{1}{4}$, NE $\frac{1}{4}$, Sec 8Twp 50N, R5W (see attached)Location West Riverview Drive to Madison 2nd driveway on righton Madison road after the Madison house.Size of lot 10 acres ft. x _____ ft.Applicant's signature _____ Applicant Is: ☒ Owner _____ Other _____

Mailing Address: _____ Phone _____

SITE EVALUATION

Testhole #1 0-60" fine sandy silt
60-72" sand & gravel

Testhole #2 _____

Testhole #3 _____

Testhole #4 _____

Remarks: Approved for a drainfield in the vicinity of the
test hole.Valid for one year from date: Nov 23, 1988 By: Anthony Davis
Environmental Health Specialist

INDIVIDUAL SEWAGE DISPOSAL INSTALLATION PERMIT

INDIVIDUAL SEWAGE DISPOSAL PERMIT

Permit # 1775Fee: 85.00Date: 10-13-88

PLOT PLAN ATTACHED (show house, other buildings, etc.)

No. Living Units 1 Bedrooms 2 People served 1 Other _____Septic Tank: 1000 Gallons, Distance to dwelling foundation: 5 ft. min.

Well: 50 ft. min. Water Line: 10 ft. min. Surface Water: 50 ft. min.

Type of tank: Cement ☒ Other _____Disposal area: Drainfield ☒ Ab. Bed _____ Other _____ Dimensions 170' x 36" wide

Component separations: Property lines 5 ft. min./Dwelling foundation 20 ft. min./Well 100 ft. min./Surface water 300 ft./min./Neighbor's well 100 ft. min./Septic tank 6 ft. min./Water service lines 25 ft. min./Water suction line 100 ft. min.

Remarks and/or conditions: _____

I understand that this permit is non-transferable and is valid for 1 year from date of application. Drainfield must not exceed 4 feet in depth.

Applicant's Signature Pat Stansbury 509Mailing address: P.O. Box 89, Lakeview, MO 64501 Phone 534 6600Plot plan submitted Nov 13, 1988 Approved ☒ Disapproved _____Permit issued by Anthony Davis Environmental Health Specialist

THIS OFFICE MUST BE NOTIFIED FOR FINAL INSPECTION 24 HOURS BEFORE COVERING SYSTEM

Inspection: System covered _____ Approved _____ Not approved _____

Inspected by _____ Installed by _____

Remarks _____ Date: _____

**DETAILED
PLOT
PLAN**

Permit # _____ Date _____
Name _____
Legal Desc _____
Lot size or acreage _____

**PLAN
MUST
SHOW**

Setbacks & Existing or Proposed Easements, Existing buildings, Location and dimensions of lot lines, proposed buildings, septic system, and distances to wells, water lines, surface water, house, etc.

North



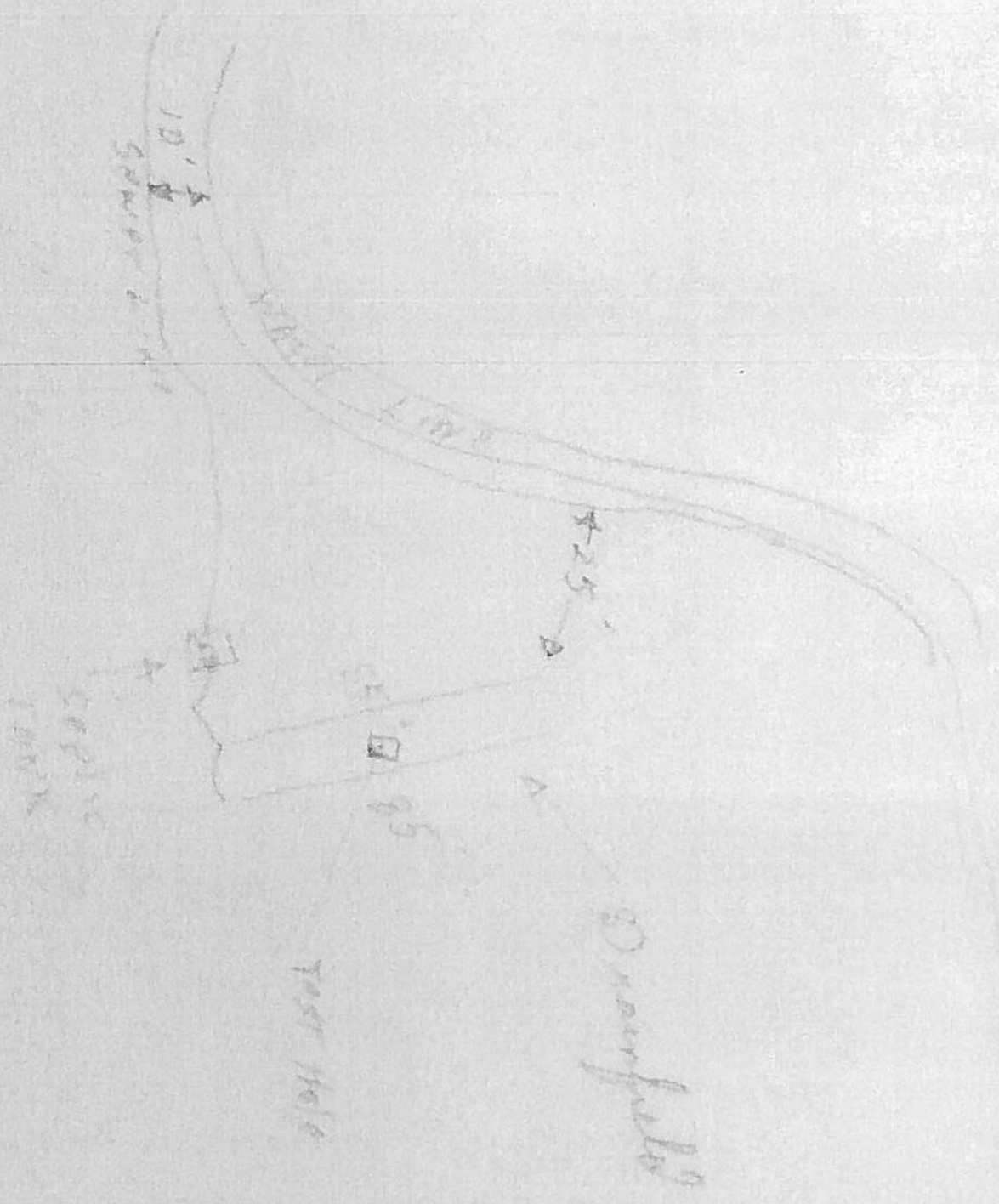
The information shown and the statements I have made are correct.

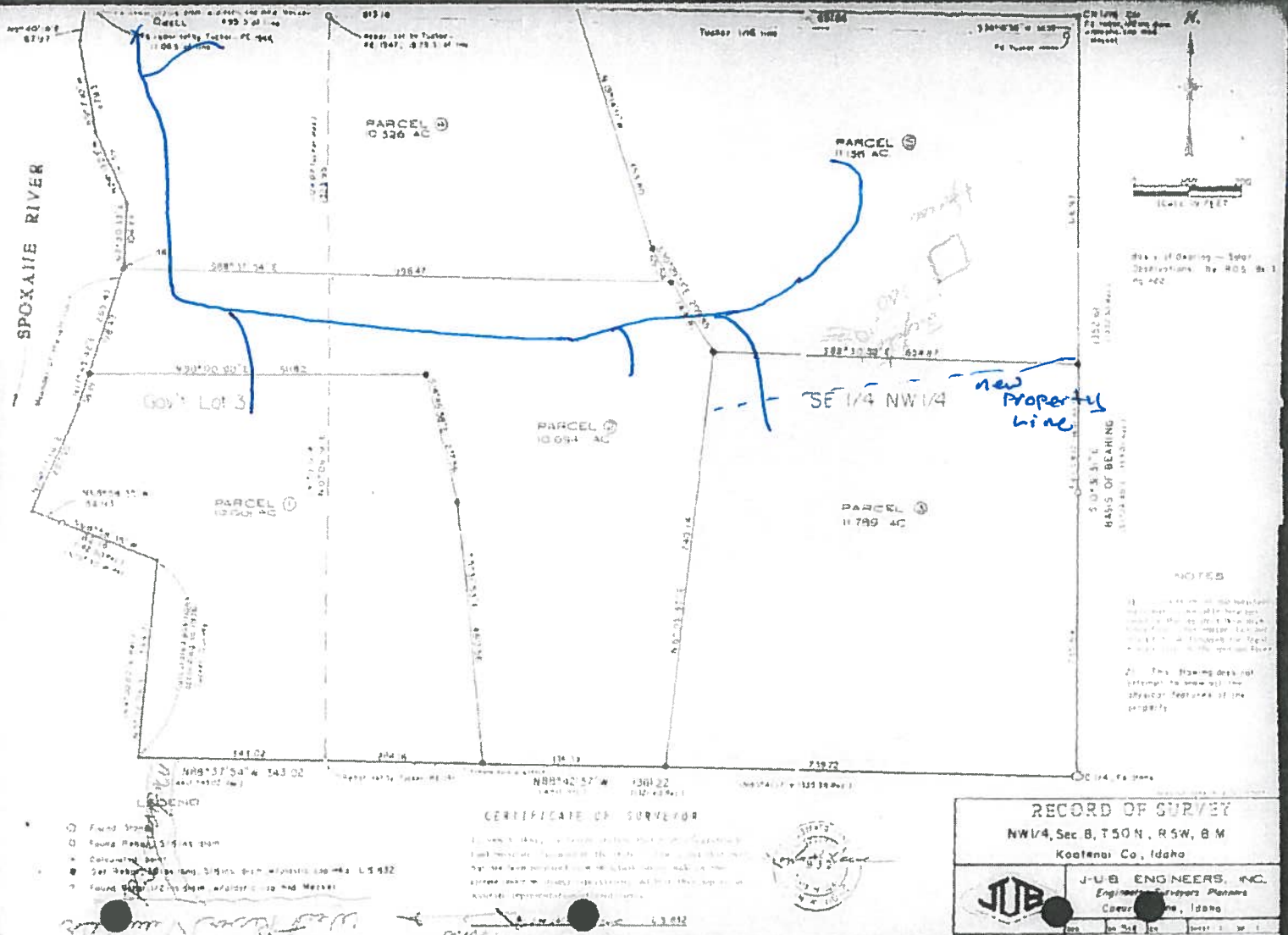
Applicant's Signature _____

Date _____

NOTE: A scale drawing may be required. Installer's as-built drawings must be made on plot plan.

Information shown and the statements I have made are correct.





Pleasant View

NE

August 22, 1985

CLIENT: Pat Stansbury
BASIS OF BEARING: Solar Observations

Pat Stansbury

J-U-B DRAWING NUMBER: CB50821

PARCEL NO. 5

A part of the SE 1/4 NW 1/4, Sec. 8, Township 50 North, Range 5 West, B.M., Kootenai County, Idaho; more particularly described as follows:

BEGINNING at the NE cor. of said SE 1/4 NW 1/4 (CN 1/16 cor.) monumented by a rebar, 1/2 ins. diam., mkd. Meckel;

thence S. $0^{\circ}31'31''$ E., 616.97 ft. along the East boundary of said SE 1/4 NW 1/4 (of record as S. $1^{\circ}24'40''$ E. on a 1978 Meckel survey) to a rebar, 30 ins. long, 5/8 ins. diam., with a plastic cap mkd. LS 832;

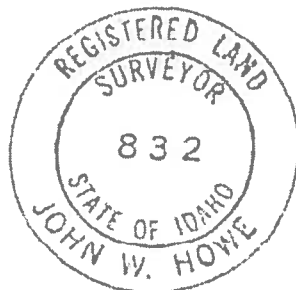
thence N. $88^{\circ}30'53''$ W., 654.87 ft. to a rebar, 30 ins. long, 5/8 ins. diam., with a plastic cap mkd. LS 832;

thence N. $30^{\circ}29'33''$ W., 209.85 ft. to a rebar, 30 ins. long, 5/8 ins. diam., with a plastic cap mkd. LS 832;

thence N. $18^{\circ}14'11''$ W., 453.80 ft.;

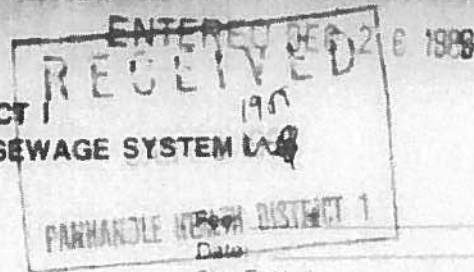
thence S. $89^{\circ}14'34''$ E., 897.56 ft. along the North boundary of said SE 1/4 NW 1/4 according to the boundary monumented by Meckel Engineers to the POINT OF BEGINNING.

This parcel contains 11.136 acres.



7084231

PANHANDLE HEALTH DISTRICT 1
APPLICATION AND PERMIT FOR ON-SITE SEWAGE SYSTEM



INDIVIDUAL SEWAGE DISPOSAL SITE EVALUATION

Paid: Cash ☐ Check ☒ No Fee ☐

Fee: _____
Date: _____
Site Eval. # _____

For (name) Pat Stansbury
Legal description of property Parcel No. 3 - A part of the SEC. 4E, T2S, R2E, Sec 8
Two 500, ASW (see attached)
Location West Riverview Drive to Madison
on highway east of H. M. Lane Jr. Rd.
Size of lot 10 acres ft x _____ ft
Applicant's signature [Signature] Applicant is: _____ Owner ☐ Other ☐
Mailing Address: _____ Phone _____

SITE EVALUATION

Testhole #1 _____ Testhole #2 _____
Testhole #3 _____ Testhole #4 _____
Remarks Approx. 4' deep, full on the surface of the
lot.

Valid for one year from date Dec 2, 1988 By: [Signature]
Environmental Health Specialist

INDIVIDUAL SEWAGE DISPOSAL INSTALLATION PERMIT

INDIVIDUAL SEWAGE DISPOSAL PERMIT

Fee: _____
Date: 12-27-88

Permit # 1225
PLOT PLAN ATTACHED (show house, other buildings, etc.)
No. Living Units _____ Bedrooms _____ People served _____ Other _____
Septic Tank: _____ Gallons, Distance to dwelling foundation: 5 ft. min.
Well: 50 ft. min. Water Line: 10 ft. min. Surface Water: 50 ft. min.
Type of tank: Cement _____ Other _____
Disposal area: Drainfield _____ Ab. Bed _____ Other _____ Dimensions 14' x 36'
Component separations: Property lines 5 ft. min./Dwelling foundation 20 ft. min./Well 100 ft. min./Surface water 300
ft./min./Neighbor's well 100 ft. min./Septic tank 6 ft. min./Water service lines 25 ft. min./Water suction line 100 ft. min.
Remarks and/or conditions: _____

I understand that this permit is non-transferable and is valid for 1 year from date of application. Drainfield must not exceed 4 feet in depth.

Applicant's Signature _____ Phone _____
Mailing address: _____
Plot plan submitted _____ Approved _____ Disapproved _____
Permit issued by _____ Environmental Health Specialist

THIS OFFICE MUST BE NOTIFIED FOR FINAL INSPECTION 24 HOURS BEFORE COVERING SYSTEM

Inspection: System covered _____ Approved _____ Not approved _____
Inspected by _____ Installed by [Signature] Date 12-20-88
Remarks _____